

CONTRACT ID NO.: DISTRICT: RESIDENCY:

[illegible]

(Continued)

No.	Contract Item No.	Material Description	A: Column D From Previous Inventory Statement		B: Received For Storage From _____ To _____ (Dates)		C: Removed From Storage From _____ To _____ (Dates)		D: Current Inventory (A+B)-C=D	
			A1 Quan.& Unit	A2 Invoice Cost	B1 Quan.& Unit	B2 Invoice Cost	C1 Quan.& Unit	C2 Invoice Cost	D1 Quan.& Unit	D2 Invoice Cost
									Sub-Total This Page	
									Sub-Total Front Page	
									TOTAL	

CERTIFICATION: This is to certify that, to the best of my knowledge, the information provided herein is accurate and complete, and the materials described herein conform to the requirements of the Contract.

CONTRACTOR _____
SIGNED _____
(OFFICER OF COMPANY or AUTHORIZED REPRESENTATIVE)
DATE _____

Original to: Residency Administrator
Copy To: Scheduling & Contract / Estimating
Construction Manager
Contractor